

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Tea Party Patriots Citizens Fund		FEC IDENTIFICATION NUMBER ▼ C C00540898
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Victory Media Group [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2018	
Mailing Address 1701 East Lake Ave. Ste. 335		Amount 7093.49	
City Glenview	State IL	Zip Code 60025	Transaction ID : SE.558500
Purpose of Expenditure IE-Morrisey-Telemarketing	Category/ Type	001	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2018
Name of Federal Candidate MORRISEY, PATRICK, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Victory Media Group [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2018	
Mailing Address 1701 East Lake Ave. Ste. 335		Amount 579.06	
City Glenview	State IL	Zip Code 60025	Transaction ID : SE.558501
Purpose of Expenditure IE-Morrisey-Voter Data	Category/ Type	001	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2018
Name of Federal Candidate MORRISEY, PATRICK, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kilgore, Paul, A, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY
05 / 01 / 2018

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE	2	OF	2
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) Tea Party Patriots Citizens Fund		FEC IDENTIFICATION NUMBER ▼ C C00540898	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Victory Media Group X		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2018	
Mailing Address 1701 East Lake Ave. Ste. 335		Amount 2500.00	
City Glenview	State IL	Zip Code 60025	Transaction ID : SE.558503
Purpose of Expenditure IE-Morrisey-Script Writing	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2018	
Name of Federal Candidate MORRISEY, PATRICK, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶	7672.55

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kilgore, Paul, A, Mr.,
[Electronically Filed]

Date

MM / DD / YYYY
05 / 01 / 2018

Signature